

**FEC  
FORM 3X****REPORT OF RECEIPTS  
AND DISBURSEMENTS**  
For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines.

12FE4M5

Vectren Corporation Employees Federal PAC

ADDRESS (number and street)

One Vectren Square

Check if different  
than previously  
reported. (ACC)

Evansville

IN

47708

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

C C00240069

3. IS THIS  
REPORTNEW  
(N)

OR

AMENDED  
(A)

## 4. TYPE OF REPORT

(Choose One)

(a) Quarterly Reports:

☐ April 15  
Quarterly Report (Q1)☐ July 15  
Quarterly Report (Q2)☐ October 15  
Quarterly Report (Q3)☐ January 31  
Year-End Report (YE)☐ July 31 Mid-Year  
Report (Non-election  
Year Only) (MY)☐ Termination Report  
(TER)(b) Monthly  
Report  
Due On:☐ Feb 20 (M2)☐ May 20 (M5)☐ Aug 20 (M8)☐ Nov 20 (M11)  
(Non-Election  
Year Only)☐ Mar 20 (M3)☐ Jun 20 (M6)☐ Sep 20 (M9)☐ Dec 20 (M12)  
(Non-Election  
Year Only)☐ Apr 20 (M4)☐ Jul 20 (M7)☐ Oct 20 (M10)☐ Jan 31 (YE)

(c) 12-Day

PRE-Election

Report for the:

☐ Primary (12P)☒ General (12G)☐ Runoff (12R)☐ Convention (12C)☐ Special (12S)

Election on

M M M /

D D D /

Y Y Y Y Y Y

in the  
State of

IN

(d) 30-Day

POST-Election

Report for the:

☐ General (30G)☐ Runoff (30R)☐ Special (30S)

Election on

M M M /

D D D /

Y Y Y Y Y Y

in the  
State of

5. Covering Period

M M M /

D D D /

Y Y Y Y Y Y

through

M M M /

D D D /

Y Y Y Y Y Y

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Blenner, Leslie, , ,

Type or Print Name of Treasurer

Signature of Treasurer

Blenner, Leslie, , ,

[Electronically Filed]

Date

M M M /

D D D /

Y Y Y Y Y Y

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 52 U.S.C. § 30109.

Office  
Use  
Only**FEC FORM 3X**  
Rev. 05/2016

# SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 05/2016)

Page 2

Write or Type Committee Name

Vectren Corporation Employees Federal PAC

Report Covering the Period: From: M M / D D / Y Y Y Y Y 10 / 01 / 2016 To: M M / D D / Y Y Y Y Y 10 / 19 / 2016

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <span style="border: 1px solid black; padding: 2px;">Y Y Y Y Y</span> 2016		76445.14
(b) Cash on Hand at Beginning of Reporting Period.....	64370.74	
(c) Total Receipts (from Line 19) .....	7500.00	110621.65
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	71870.74	187066.79
7. Total Disbursements (from Line 31).....	6231.53	121427.58
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	65639.21	65639.21
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	

☒ This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

## For further information contact:

Federal Election Commission  
999 E Street, NW  
Washington, DC 20463

Toll Free 800-424-9530  
Local 202-694-1100

# **DETAILED SUMMARY PAGE** of Receipts

FEC Form 3X (Rev. 05/2016)

Page 3

Write or Type Committee Name

Vectren Corporation Employees Federal PAC

Report Covering the Period:

From:

M M	/	D D	/	Y Y Y Y Y Y
10		01		2016

To:

M M	/	D D	/	Y Y Y Y Y Y
10		19		2016

**I. Receipts**
**COLUMN A**  
Total This Period

**COLUMN B**  
Calendar Year-to-Date

## 11. Contributions (other than loans) From:

## (a) Individuals/Persons Other

Than Political Committees

## (i) Itemized (use Schedule A).....

7500.00

78813.58

## (ii) Unitemized .....

0.00

18058.07

## (iii) TOTAL (add

Lines 11(a)(i) and (ii).....▶

7500.00

96871.65

## (b) Political Party Committees .....

0.00

0.00

## (c) Other Political Committees

(such as PACs).....

0.00

0.00

## (d) Total Contributions (add Lines

11(a)(iii), (b), and (c)) (Carry

Totals to Line 33, page 5) .....

7500.00

96871.65

## 12. Transfers From Affiliated/Other

Party Committees.....

0.00

0.00

## 13. All Loans Received .....

0.00

0.00

## 14. Loan Repayments Received.....

0.00

0.00

## 15. Offsets To Operating Expenditures

(Refunds, Rebates, etc.)

(Carry Totals to Line 37, page 5).....

0.00

0.00

## 16. Refunds of Contributions Made

to Federal Candidates and Other

Political Committees.....

0.00

13750.00

## 17. Other Federal Receipts

(Dividends, Interest, etc.).....

0.00

0.00

## 18. Transfers from Non-Federal and Levin Funds

## (a) Non-Federal Account

(from Schedule H3) .....

0.00

0.00

## (b) Levin Funds (from Schedule H5) .....

0.00

0.00

## (c) Total Transfers (add 18(a) and 18(b))..

0.00

0.00

19. Total Receipts (add Lines 11(d),  
12, 13, 14, 15, 16, 17, and 18(c)) .....

7500.00

110621.65

## 20. Total Federal Receipts

(subtract Line 18(c) from Line 19) .....

7500.00

110621.65

# **DETAILED SUMMARY PAGE** of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share .....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures .....	106.53	1060.53
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	106.53	1060.53
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	37250.00
24. Independent Expenditures (use Schedule E) .....	0.00	0.00
25. Coordinated Party Expenditures (52 U.S.C. § 30116(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	0.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements (Including Non-Federal Donations).....	6125.00	83117.05
30. Federal Election Activity (52 U.S.C. § 30101(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share .....	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds .....	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b)) .....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	6231.53	121427.58
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	6231.53	121427.58

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 5

<b>III. Net Contributions/ Operating Expenditures</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Calendar Year-to-Date</b>
33. Total Contributions (other than loans) (from Line 11(d), page 3) .....	7500.00	96871.65
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	7500.00	96871.65
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....	106.53	1060.53
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	106.53	1060.53

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 6 OF 9  
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**Vectren Corporation Employees Federal PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. Smith, Michael, , ,**

Mailing Address 15358 Whistling Ln

City  
Carmel

State  
IN

Zip Code  
46033-8120

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Vectren

Occupation (for Individual)  
Board Of Directors

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1500.00

Date of Receipt

10 / 13 / 2016

**Transaction ID : A00BD7A8A922A481CB65**

Amount of Each Receipt this Period

1500.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. Sadlier, Daniel, , ,**

Mailing Address 7184 Hunters Creek Dr

City  
Dayton

State  
OH

Zip Code  
45459-3470

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Vectren Corporation

Occupation (for Individual)  
Director Of Vectren Board

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1500.00

Date of Receipt

10 / 13 / 2016

**Transaction ID : A50F61E5D7CAF45D5BE5**

Amount of Each Receipt this Period

1500.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. Mullen, Patrick, K., ,**

Mailing Address 75 Heritage Hill Cir.

City  
Spring

State  
TX

Zip Code  
77381-1403

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Information Requested

Occupation (for Individual)  
Information Requested

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1500.00

Date of Receipt

10 / 13 / 2016

**Transaction ID : AB1EABB612175404591E**

Amount of Each Receipt this Period

1500.00

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

4500.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 7 OF 9  
 (check only one)  
☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Vectren Corporation Employees Federal PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. Wojtowicz, Jean, , ,**

Mailing Address 7107 Royal Oakland Ct

City  
Indianapolis

State  
IN

Zip Code  
46236-9153

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Vectren Corporation

Occupation (for Individual)  
Director of the Board

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 10 / 13 / 2016

**Transaction ID : A1D3D7D47E1164C19A11**

Amount of Each Receipt this Period

1500.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. Engelbrecht, John, , ,**

Mailing Address 101 E Jennings St  
Apt A

City  
Newburgh

State  
IN

Zip Code  
47630-1468

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Vectren

Occupation (for Individual)  
Board Of Directors

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 10 / 13 / 2016

**Transaction ID : ACA9B8B2895E74057A75**

Amount of Each Receipt this Period

1500.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C.**

Mailing Address

City

State

Zip Code

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

3000.00

**TOTAL** This Period (last page this line number only)..... ►

7500.00

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 8 OF 9

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**Vectren Corporation Employees Federal PAC**

Full Name (Last, First, Middle Initial)

**A. Fifth Third Bank**

Mailing Address 20 NW 3rd St

City  
EvansvilleState  
INZip Code  
47708-1200Purpose of Disbursement  
Bank Fee

Candidate Name

 Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

 Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼
Category/  
Type

Date of Disbursement

M M	/	D D	/	Y Y Y Y Y Y
10		13		2016

FEC Identification Number

C

**Transaction ID : B8C267DB55**

Amount of Each Disbursement this Period

106.53

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B.**

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

 Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

 Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼
Category/  
Type

Date of Disbursement

M M	/	D D	/	Y Y Y Y Y Y

FEC Identification Number

C

Amount of Each Disbursement this Period

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

 Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

 Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼
Category/  
Type

Date of Disbursement

M M	/	D D	/	Y Y Y Y Y Y

FEC Identification Number

C

Amount of Each Disbursement this Period

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

106.53

106.53



**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 9 OF 9

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**Vectren Corporation Employees Federal PAC**

Full Name (Last, First, Middle Initial)

**A. Friends of Barry Glassman**

Mailing Address P.O. Box 273

City  
ChurchvilleState  
MDZip Code  
21028-0273Purpose of Disbursement  
Contribution to State Committee

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2018

☐ Primary ☐ General  
☒ Other (specify) ▼

State: District:

Cycle

Category/  
Type

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	0			0	6			2	0	1	6		

FEC Identification Number

**C** **Transaction ID : B0902430C6c**

Amount of Each Disbursement this Period

 125.00☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Justice for Governor**

Mailing Address P.O. Box 40027

City  
CharlestonState  
WVZip Code  
25364-0027Purpose of Disbursement  
Contribution to Committee

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016

☐ Primary ☒ General  
☐ Other (specify)

State: District:

Category/  
Type

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	0			1	2			2	0	1	6		

FEC Identification Number

**C** **Transaction ID : B3EEABB3D4**

Amount of Each Disbursement this Period

 1000.00☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. Indiana House Democratic Caucus**

Mailing Address 115 W. Washington St, Suite 1165

City  
IndianapolisState  
INZip Code  
46204-3418Purpose of Disbursement  
Contribution to State Committee

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016

☐ Primary ☐ General  
☒ Other (specify) ▼

State: District:

Other

Category/  
Type

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	0			1	8			2	0	1	6		

FEC Identification Number

**C** **Transaction ID : B8062C87E8**

Amount of Each Disbursement this Period

 5000.00☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ► 6125.00 6125.00